

LOAN APPLICATION FORM

1 PERSONAL DETAILS

Name Member Number

Residential Status Home Owner Renting Living At Home

Home Address

Home Address (If less than 2 years at current address)

Work Address

Home Phone Work Phone Mobile Email

Marital status - *please tick* Single Married Widowed Separated/Divorced

Number of family members financially dependent on you Ages 1 2 3 4

2 LOAN DETAILS

Amount required € New Separate Loan Top-up on Existing Loan *Please tick*

Warning: if you are topping up your loan, this may take longer to pay off than your previous loan. This means you may pay more than if you paid in the shorter term.

Reason for loan Loan term year(s)

Proposed Total Repayments (to cover new and any existing loans)

Standard Loan	Green Loan	1 year Loan	Education Loan
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>
Consolidation Loan	Restructure Loan	Mortgage Switch Loan	Electric Vehicle Loan
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>
Your Choice Loan	Your Place Loan	Your Home Loan	<i>Please tick box</i>
€ <input type="text"/>	€ <input type="text"/>	€ <input type="text"/>	<input type="checkbox"/> Weekly <input type="checkbox"/> Fortnightly <input type="checkbox"/> Monthly

Shares € Send cheque to Home address Work location Agent Will collect

OR Home address Work location Agent Will collect

ESB Staff Only ESB Staff Only

EFT An Indemnity & Authority form is required for EFT services. Please state who the cheque(s) are to be made payable to

3 EMPLOYMENT DETAILS

Occupation Name of employer

Length of service with current employer Years Months

Employment Status Permanent Contract Retired Apprentice

Contract Expiry Date / /

Apprenticeship Expiry Date / /

4 FINANCIAL DETAILS

Income	Gross p.a	Take Home Pay	Weekly	Fortnightly	Monthly
Basic Salary/Pension	€ <input type="text"/>	€ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basic other Salary	€ <input type="text"/>	€ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Welfare Payments	€ <input type="text"/>	€ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional Allowances	€ <input type="text"/>	€ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spouse/Partner basic Salary/Pension	€ <input type="text"/>	€ <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4 FINANCIAL DETAILS Continued

Employment Status (spouse/partner)	Please tick as appropriate	<input type="checkbox"/> Permanent <input type="checkbox"/> Contract	Contract Expiry Date
Other household income	€	Please Specify	/ /
Investment/savings other than Savvi	€	Please Specify	
Outgoings	Repayment amount	Balance outstanding	Frequency Please tick
Mortgage on Family Home <i>Is mortgage repayment temporarily reduced?</i>	€ <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please supply written agreement from your Bank)	€	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Mortgage on 2nd Property <i>Is mortgage repayment temporarily reduced?</i>	€ <input type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, please supply written agreement from your Bank)	€	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Rent	€		<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Carloan	€	€	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Credit Card	€	€	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Childminding fees	€		<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Other loans (not including Savvi)	€	€	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly
Other expenditure (please specify)	€	€	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly

5 DECLARATION Consent to use and disclosure/Data Protection Acts 1988 and 2003:

I warrant and confirm that the information given here is in all aspects true and complete. I understand that it is being used to determine my credit responsibility. I DECLARE that I am not indebted to any other Credit Union, bank, building society or loan agency as a borrower or a guarantor, except as stated above. The statements made herein are made for the purpose of obtaining the loan and are true to the best of my knowledge and belief. I confirm that I have the financial means to repay this loan and that it will be used for the purpose stated overleaf. I confirm that I understand that my shares will be held as a security for this loan.

I authorise Savvi Credit Union Ltd. to make whatever enquiries are deemed necessary to process this application. I understand this may involve the use of Credit Bureau or Credit Reference Agencies.

ICB Consent

I authorise Savvi Credit Union Ltd. to process and retain data provided by me in respect of this application, to seek and provide credit references (searches) from/to Irish Credit Bureau Limited (ICB), to record details of any transaction which may result from this application with ICB and for ICB to record, retain and disclose to its members details of such searches for a period of one year. I am aware that loan information is retained by ICB for a period of 5 years from the date of repayment in full/closure of an account. I consent to any such application being processed, recorded and retained by ICB.

Signature Date / /

6 DECLARATION OF SPOUSE/PARTNER (To be completed where spouse/partner's income documents are being provided)

I authorise Savvi Credit Union Ltd. to process and retain data provided by me in respect of this application, to seek and provide credit references (searches) from/to Irish Credit Bureau Limited (ICB), to record details of any transaction which may result from this application with ICB and for ICB to record, retain and disclose to its members details of such searches for a period of one year. I am aware that loan information is retained by ICB for a period of 5 years from the date of repayment in full/closure of an account. I consent to any such application being processed, recorded and retained by ICB.

Name of spouse/partner PhoneNo.
 Date of Birth of spouse/partner / /
 Signature Date / /

Please note that the credit union may require you to forward proof of ID and proof of current address as per the Criminal Justice Act 2013

7 What prompted you to take out a loan with Savvi Credit Union Ltd. (optional question to be used for marketing purposes only):

1. Website 2. Posters in work location 3. Newsletter 4. Sub-office visits 5. Always borrow from Savvi
 6. Other (please specify)

CHECKLIST The following documents may be required in support of your application.

- 1 recent pay-slip. Bank account statement for the previous 2 months. Credit card statement (if applicable) for the previous month.

- The Credit Union reserves the right to request further documents in certain circumstances.
- If you are including your spouse's/partner's income on the application we will require the documents above plus a Salary Certificate* which can be downloaded from www.savvi.ie in the Download Forms section.

*The Salary Certificate is a confirmation of terms and salary and should be completed by the employer.